

F&amp;R 4-22-2003

## Checklist for RESPONSE TO OFFICE ACTION

June 17, 2004

Client/Matter Number: 17539-013001

Client/Matter Name: STL 9980 - Method and Apparatus For Read Error Recovery

Sec	Att	PS	Check Items
<b>PRE-FILING DETERMINATIONS</b>			
		<input checked="" type="checkbox"/>	<b>Timing</b>
Action has been checked to confirm the due date was docketed correctly & is satisfied by this Response			
<b>REQUIRED FILING ENCLOSURES</b>			
X	<input checked="" type="checkbox"/>	<b>Caption</b>	(1) serial number, & (2) filing date have been checked for accuracy against information in the file.
NA	<input checked="" type="checkbox"/>	<b>Postcard</b>	(1) billing attorney's initials, & (2) list of all papers being sent and the pages of each.
X	<input checked="" type="checkbox"/>	<b>Response</b>	(4) requests consideration of all filed IDS' not considered by Examiner, with each item on all Form 1449's initialed, (2) identifies mailing date of Action, (2) lists all items being submitted, & (4) includes standard charges/credits statement
X	<input checked="" type="checkbox"/>	<b>Formatting</b>	X Each Section begins on a different page: Introductory Comments, Spec, Claims, Abstract, Drawings, Remarks <input checked="" type="checkbox"/> All claims are presented, necessary when at least one claim is being added, currently amended, cancelled, withdrawn
X	<input checked="" type="checkbox"/>	<b>Filing fee</b>	<input type="radio"/> NONE REQUIRED <input checked="" type="radio"/> CHECK <input checked="" type="checkbox"/> DEPOSIT ACCOUNT CHARGE, indicated on document
X	<input checked="" type="checkbox"/>	<b>Ext. of Time</b>	<input type="radio"/> NONE REQUIRED <input checked="" type="checkbox"/> INCLUDED, with fee
X	<input checked="" type="checkbox"/>	<b>Appeal/Con. App.</b>	X NONE REQUIRED <input type="radio"/> INCLUDED, if responding to FINAL action within 1 month before 6-mon. BAR
NA	<input checked="" type="checkbox"/>	<b>Mail Certificate</b>	(1) includes 1st Class mail certificate, & (2) is signed and dated
NA	<input checked="" type="checkbox"/>	<b>Envelope</b>	Preprinted envelope or label is used, addressed to:  NON-FINAL actions: MAIL STOP AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450  FINAL actions: MAIL STOP AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
<b>TASKS AFTER ATTORNEY/AGENT/CHECK</b>			
<input checked="" type="checkbox"/>	<b>File copies</b>	(1) are complete & (2) include all signatures and dates	
<input checked="" type="checkbox"/>	<b>Manual Docket</b>	Billing secretary's manual docket entry is updated	
<input checked="" type="checkbox"/>	<b>Database Update</b>	Copy of postcard sent to Patent Services	
<input checked="" type="checkbox"/>	<b>Folder Update</b>	File copy, tab, and updated table of contents are filed in prosecution folder	
Checked By:		CWT	6/17/04
		Attorney/Agent	Date
		Secretary	